



Indiana Department of Environmental Management

We Protect Hoosiers and Our Environment.

100 N. Senate Avenue • Indianapolis, IN 46204
(800) 451-6027 • (317) 232-8603 • www.idem.IN.gov

Michael R. Pence
Governor

Carol S. Comer
Commissioner

December 2, 2016

Beth Davis, Auditor
Wells County
102 W Market St Ste 205
Bluffton, Indiana 46714

Dear County Auditor:

Re: Geothermal Heating/Cooling Device
Pursuant to IC 6-1.1-12-34
Property Tax Deduction for
Michael & Megan Myers
5866 N 300 W
Uniondale, Indiana 46791
Parcel Number: 90-04-04-100-007.000-
016

The above referenced claim for a property tax deduction, attached State Form 18865 and supplemental attachments, submitted by the above referenced applicant, have been reviewed by this Office in accordance with IC 6-1.1-12-35.5. Please be advised that the heating/cooling system outlined in the claim for exemption (18865) qualifies as a geothermal system as defined in IC 6-1.1-12-34. The total amount of this claim shall be pursuant to IC 6-1.1-12-34(b). This certification does not include a determination as to the total actual or depreciated value of the claimed property.

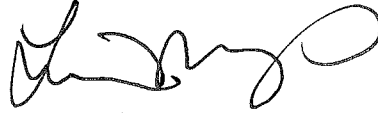
This certification is for the life of the installed equipment and does not need to be requested on an annual basis. However, when the equipment is no longer in service, the owner of the equipment for which this certification is made must give written confirmation to the assessor of the township or county in which the equipment is installed.

Additionally, this certification does not include a determination as to the timeliness of the claim nor whether the property claimed for exemption is real or personal property.



If you have any questions concerning this matter, you may contact Ms. Donna Palmer at (317) 233-0478.

Sincerely,

A handwritten signature in black ink, appearing to read "Lance Myers", with a stylized, flowing script.

Lance Myers, Section Chief
Operations Section
Office of Water Quality

Certification/Approval Number: 161133
Michael & Megan Myers

FILED

DEC 02 2016



STATEMENT FOR DEDUCTION OF ASSESSED VALUATION (Attributed to Solar Energy System or Solar, Wind, Geothermal, or Hydroelectric Power Device)

State Form 18865 (R11 / 10-15)

Prescribed by the Department of Local Government Finance

FORM SES / WPD

Beth Davis
WELLS COUNTY AUDITOR

INSTRUCTIONS: To be filed in person or by mail by the owner of such property with the County Auditor of the county in which the property is located. A person who is no longer eligible for this deduction shall notify the County Auditor of this change. (IC 6-1.1-12-36)

- FILING DATES:**
- (1) **Real Property:** Must be completed and dated by December 31 of the year for which the person wishes to obtain the deduction and filed or postmarked on or before January 5 of the following calendar year.
 - (2) **Mobile/Manufactured Home assessed under IC 6-1.1-7:** Must be completed, dated, and filed during the twelve (12) months before March 31 of the year the deduction is to be effective.
 - (3) **State Distributable Property under IC 6-1.1-8 (solar powered device only):** Must be completed and dated by December 31 of the year for which the person wishes to obtain the deduction and filed on or before January 5 of the following calendar year.
 - (4) **Personal Property under IC 6-1.1-3 (solar powered device only):** Must be completed and dated by December 31 of the year for which the person wishes to obtain the deduction and filed on or before January 5 of the following calendar year. In addition to filing this form for the deduction, an applicant must also attach a Form 103-SPD to either his personal property tax return or his amended personal property tax return for each year the deduction is desired.
(IC 6-1.1-12-26; 6-1.1-12-26.1; 6-1.1-12-27.1; 6-1.1-12-29; 6-1.1-12-30; 6-1.1-12-33; 6-1.1-12-34; 6-1.1-12-35.5; 6-1.1-12-36)

All claims for a deduction filed on a geothermal or hydroelectric system or device must be accompanied by proof of certification of qualification by the Department of Environmental Management pursuant to IC 6-1.1-12-35.5.

CERTIFICATION STATEMENT

I (We), Myers, Michael / Megan certify that I (we) own or am (are) buying on contract or am (are) leasing the real property from the real property owner the following real property, mobile/manufactured home, state distributable property, or personal property that is subject to assessment and property taxation and for which a:

- ☐ Solar Energy Heating or Cooling System ☐ Wind Power Device ☒ Geothermal Device ☐ Hydroelectric Device
- Solar Power Device*: ☐ Real ☐ Mobile/Manufactured Home ☐ State Distributable ☐ Personal Property

*Applies to a solar power device installed after December 31, 2011.

deduction from assessed valuation is hereby claimed in Wells county.

Date system/device was installed (month, day, year)
June 2016

Total deduction claimed
\$

PROPERTY DESCRIPTION

Taxing District (city, town, township)
Rockcreek

Township
Rockcreek

Legal description or key number
SE PT NE NE

If a deduction was allowed last year, have there been any changes in the property?

☐ Yes ☒ No

Parcel number
90-04-04-100-007.000-016

Address of owner (number and street, city, state, and ZIP code)
5866 N 300w Uniondale, IN 46791

I (We) hereby certify that the above statement is true, correct, and complete.

Signature
Michael Myers

Date (month, day, year)
12-2-16

FOR AUDITOR'S USE ONLY

Assessment Date First Effective
20 ____ Payable 20 ____

1 Total assessed value of real property or mobile/manufactured home including qualifying device/system.

\$

2(a) For wind; geothermal; hydroelectric; real property or mobile/manufactured home with a solar powered device: Enter the assessed valuation without the qualifying device/system.

2(b) For solar energy system only: Out-of-pocket expenditures for components and installation labor.

2(c) For personal property solar power device deduction: Enter amount calculated on Form 103-SPD.

2(d) For state distributable solar power device deduction: Enter assessed value of qualifying equipment.

3 Deduction: Line 1 minus Line 2(a); or enter the actual amount shown on Line 2(b), 2(c), or 2(d).

VERIFICATION BY ASSESSING OFFICIAL

Is property recommended for deduction?

☐ Yes ☐ No

Recommended deduction

Comments, if any

Signature of assessing official

Printed name of assessing official

Date signed (month, day, year)

FINAL DETERMINATION OF COUNTY AUDITOR

Deduction determined by County Auditor for assessment date of _____, 20 ____ payable in 20 ____.

Approved deduction
\$

Signature of county auditor

Printed name of county auditor

Date signed (month, day, year)

Description or reasons for change:

Distribution on date of filing: Original - County Auditor; File stamped copy - Applicant; File stamped copy - Township Assessor, if any, or County Assessor
Distribution on date that determination is made: Original - County Auditor; Copy - Applicant; Copy - Township Assessor, if any, or County Assessor

Geothermal Heating and Cooling

Name
Phone

Myers, Michael/Megan
260-437-5502

Parcel #

90-04-04-100-007.000-016

Date of Installation

6/2016

Make

Bryant

Model #

GC036VTRNXET1XX1

Serial #

1616V36319

*** Please note - 12,000 BTU = 1 ton

*** With distribution means duct work with forced air or some way of distributing air throughout the house

HORIZONTAL CLOSED LOOP SYSTEM

SYSTEM TONNAGE	W/Distribution
2 TON	
2.5 TON	
3 TON	X
3.5 TON	
4 TON	
5 TON	
6 TON	

SYSTEM TONNAGE	W/O Distribution
2 TON	
2.5 TON	
3 TON	
3.5 TON	
4 TON	
5 TON	
6 TON	

VERTICAL CLOSED LOOP SYSTEM

SYSTEM TONNAGE	W/Distribution
2 TON	
2.5 TON	
3 TON	
3.5 TON	
4 TON	
5 TON	
6 TON	

SYSTEM TONNAGE	W/O Distribution
2 TON	
2.5 TON	
3 TON	
3.5 TON	
4 TON	
5 TON	
6 TON	

OPEN DISCHARGE OPEN LOOP SYSTEM

SYSTEM TONNAGE	W/Distribution
2 TON	
2.5 TON	
3 TON	
3.5 TON	
4 TON	
5 TON	
6 TON	

SYSTEM TONNAGE	W/O Distribution
2 TON	
2.5 TON	
3 TON	
3.5 TON	
4 TON	
5 TON	
6 TON	

RETURN WELL OPEN LOOP SYSTEM

SYSTEM TONNAGE	W/Distribution
2 TON	
2.5 TON	
3 TON	
3.5 TON	
4 TON	
5 TON	
6 TON	

SYSTEM TONNAGE	W/O Distribution
2 TON	
2.5 TON	
3 TON	
3.5 TON	
4 TON	
5 TON	
6 TON	

Please return form to:

Wells County Auditor
102 W Market St, Suite 205
Bluffton, IN 46714
Fax (260)824-6475



1335 W Wiley Avenue
Bluffton, IN 46714

Invoice

Date	Invoice #
6/6/2016	6323

Bill To
Mike Myers 5866 N 300 W Uniondale, IN 46791

PAID
06/06/2016
Bryan Arnold
ARNOLD & SONS

P.O. No.	Terms
New Geo	Net 30

Quantity	Description	Rate	Amount
1	Equipment and materials for installation as per bid to install 3-ton Bryant GC series Geothermal unit. Model # GC036VTRNXET1XX1 Serial # 1616V36319	7,047.09	7,047.09T
1	Labor to install	1,506.70	1,506.70
	Sales Tax	7.00%	493.30
		Total	\$9,047.09

PALMER, DONNA

From: Julie Eicher <julie.eicher@wellscounty.org>
Sent: Friday, December 02, 2016 8:17 AM
To: PALMER, DONNA
Cc: 'Laura Roberts'
Subject: Geo thermal
Attachments: SKMBT_C28416120209150.pdf

**** This is an EXTERNAL email. Exercise caution. DO NOT open attachments or click links from unknown senders or unexpected email. ****

Donna,

Here is a new Geothermal application.

Thank You,

Julie R. Eicher

Deputy Auditor

Wells County, IN

Email: julie.eicher@wellscounty.org

PH: (260)824-6470

FAX: (260)824-6475